## UTILITY PATENT APPLICATION

Attorney Docket No. 60911-00004USPX First Inventor Takayuki Ogasawara et al.

	TRANSI	•	Title				_		LER DEVICE FOR PPARATUS			
(Only for new non	provisional appi	lications under 37 CFR 1.53(b)		ss Ma	il Label No.	EL91	166454	1311	JS			
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.					MS Patent Application  ADDRESS TO: Commissioner for Patents P.O. Box 1450  Alexandria, VA 22313-1450							
X Fee Tra     (Submit a     Applicar     See 37     X Specific     (preferre     Desc     Cross	7. 8.	Nucleotide a (if applicable	ter Progra Ind/or Am India nece puter Rea Ion Sequi	am (Appe tino Acid essary) edable Fo ence Listi	indbi) Sequ im (C ing or	ance Submission						
- Refe	ment Regarding rence to sequenc computer program	c. Statements verifying identity of above copies										
- Back	ground of the inv	ention	-		ACC	OMPAN	IYING A	PPL	ICATION PARTS			
- Brief - Outai	Description of the led Description	Drawings (# filed)		9.	X Assigns	nent Pap	ers (cove	r she	et & document(s))			
- Clain - Abstr	r(s) ract of the Disclos	ure		10.			Statemen n assione		X Power of Attorney			
4. X Drawing	(s) (35 U.S.C.	113) [Total Sheets	5 1	11.	X English	Translati	on Docur	nent	(If applicable)			
5. Oath or Decla	ration	[Total Sheets	5	12.		tion Disci	losure PTO-144	9	X Copies of IDS			
a. X Nea	wly executed (c	original or copy)		13.		nary Ame						
b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/distinual with Box 18 completed)  14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)												
i DELETION OF INVENTOR(S)					15. X Certified Copy of Priority Document(s)							
	18. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).											
	see 37 CFR 1.6	3(d)(2) and 1.33(b).		17.	X Other:				D/SB/35 or its equivalent. or App filing fee; 2. \$40	l		
6. Applicat	ion Data Sheel	L See 37 CFR 1.76		"	L Coles.	check f	or filing	of As	ssignment; and 3. Claim of ion of documents			
18. If a CONTINI	UING APPLICA	ATION, check appropriate bo or in an Application Data She	x, and supp	ply the	requisite infon	mation be	low and i	in the	first sentence of the			
Continu	- —	·· —	ion-in-part (			ation No.	.:					
Prior application	on Information:	Examiner				Art Uni	<u>:                                      </u>					
For CONTINUATION OR ON/ISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5h, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inserverently omitted from the submitted application parts.												
		19. CC	ORRESPO	ONDE	NCE ADDR	ESS				_		
Custome	er Number:	2393	2		OR	×	Corresp	oonde	ence address below			
Name	I	S & GILCHRIST, A I	PROFE	SSIC	NAL COF	RPORA	TION			_		
Address	1445 Ros	ss Avenue, Suite 32	00									
City			State	TX			Zip Code 75202					
Country	US		elephone	(21	4) 855-450	00	//	ar .	(214) 855-4300	_		
Name (Print/	Type) St	eyen R. Greenfield	4		Registration I	Vo. (Atton	ney/Agen	<b>(</b> )	38,166	]		
Signature		TAS R. M. L.	И				Date	D	ecember 11, 2003	١		

FEE TO A NOBALTY A !		C mplete if Kn wn								
FEE TRANSMITTAL	•	Application Number Not Yet Assigned								
for FY 2004						Concurrently Herewith				
Effective 10/01/2003, Patient feet are subject to annual revision.		First Named Inventor				Takayuki Ogasawara				
Commercial	Examiner Name					Not Yet Assigned				
Applicant claims small entity status. See 37 CFR 1.27	Art Unit				]	N/A				
TOTAL AMOUNT OF PAYMENT (\$) 1,028.00		Attorney Docket No. 60911-00004USPX								
METHOD OF PAYMENT (check all that apply)				FEE	CALCUL	ATION (cor	rtinued)			
X Check Cradit Money Other None	3. ADDITIONAL FEES									
Deposit Account:										
Deposit 10-0447	Larg	e Entity Fee	Small	Entity	•		5.0	Fee		
Account 10-0447	Code	(\$)	Code	(\$)		Fee Des	cription	Peld		
Deposit Jenkens & Gilchrist, a	1051	130	2051	65	Surcharge	- tate filing fo	e or oath			
Name Professional Corporation	1052	50	2052	25		– late provisi	onal filing fee or cover			
The Director is authorized to: (check all that apply)  Charge feels) indicated below X Credit any overnaments	1053				sheet.	.b	_	$\vdash$		
Charge fee(s) indicated below X Credit any overpayments  Charge any additional fee(s) during the pendency of this	l	130	1053	130	•	ish specification				
application	1812	2,520	1812		•	•	parto reexamination	$\parallel \parallel \parallel$		
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	850.	Examiner		•			
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requestin Examiner	g publication ( action	of SIR after			
FEE CALCULATION	1251	110	2251	55		for reply within				
1. BASIC FILING FEE	1252	420	2252	210			n second month			
Large Entity Small Entity Fee Fee Fee Fee Fee Paid	1253	950	2253 2254	475		for reply within		$\vdash$		
Code (\$) Code (\$)	1254 1255	1,480 2,010	2254	740		for reply with:	n fourth month			
1001 770 2001 385 Utility filing fee 770.00	1401	330	2401	1,005	Extension Notice of A		त भक्ष लाह्नकी	+		
1003 530 2003 265 Plant filing fee	1402	330	2402	165		ef in support (	of an appeal			
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request to	or oral hearing	•			
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	-		-	afic use proceeding			
SUBTOTAL (1) (\$) 770.00	1452	110 1,330	2452 2453	55 665		revive - unav		┝─┤┃		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665		e fee (or reiss	┝═╣			
Extre Fee from Claims below Fee Paid	1502	480	2502	240	Design iss	•	-	H		
Total Claims 15 -20** = X = 0.00	1503	640	2503	320	Plant Issue					
Independent 6 -3** 3 x 88.00 = 258.00	1460	130	1460	130	Petitions to	o the Commis	sioner			
Multiple Dependent =	1807	50	1807	50	Processing	g fee under 37	CFR 1.17(q)			
Large Entity Small Entity	1806	180	1806	180	Submissio	on of Information Disclosure Stml				
Fee Fee Fee Fee Code (5)	8021	40	8021	40		each patent a imes number	issignment per of properties)	40.00		
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385		bmission after	final rejection			
1201 88 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each a	additional inve		├─┤┃		
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 ** Reissue independent claims	1801	770	2601			(37CFR 1.129 or Configured E	B(b)) Examination (RCE)	-1		
over original patent	1802		1802	900	Request fo	or expedited e		1		
1205 18 2205 9 ** Reissue datms in excess of 20 and over original patent	1	Other fee (specify)								
SUBTOTAL (2) (5) 258.00 Reduced by Besic Filing Fee Paid SUBTOTAL (3) (5) 40.00										
SUBMITTED BY (Complete (7 applicable))										
Name (Print/Type) Steven R. Greenfield		egistration No. 38,166 Telephone (214) 855-4			(214) 855-4789					
Signature Star C. Sintell						December 11, 2	2003			
<del></del>										

I hereby certify that this correspondence is being deposited will) the U.S. Postal Service as Express Mail, Airbill No. EL916645431US, in an envelope addressed to: Commissioner for Patents, P.Q. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: December 11, 2003

Signature: (Carol Marsteller)